PTO/SB/08b (08-08)
Approved for use through 08/31/2008, OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/553,349-Conf. #2096	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Filing Date	October 14, 2005	
				First Named Inventor	Hiroaki ZAIMA	
				Art Unit	2176	
(Use as many sheets as necessary)				Examiner Name	Amelia L Rutledge	
Sheet	1	of	2	Attorney Docket Number	0033-1033PUS1	

U.S. PATENT DOCUMENTS							
Examiner	Cite No.1	Document Number	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
Initials*		Number-Kind Code ² (if known)	MM-DD-YYYY				
	AA*	US-2003/0028673- A1	02-06-2003	Lin et al.			

FOREIGN PATENT DOCUMENTS							
Examiner	Cite	Foreign Patent Document	Date Name of Atentes	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages	 '	
Initials*	No.1	Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)		Applicant of Cited Document	Or Relevant Figures Appear	Ľ	
	ВА	WO-01/63485-A2	08-30-2001			Ū	
	ВВ	WO-02/45374-A2	06-06-2002			D	
	ВС	WO-99/21121-A2	04-29-1999			Ŀ	
				W-6.		L	
						Ļ	
				•		L	

the item (book magazine journal serial symposium catalog etc.), date, page(s), vojume-		Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
			_

Examiner	 Date	
Signature	Considered	

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.